

### PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Toru AOKI Group Art Unit: 2673

Application No.: 09/994,674 Examiner: L. Shapiro

Filed: November 28, 2001 Docket No.: 111079

For: LIQUID CRYSTAL DISPLAY, IMAGE DATA COMPENSATION CIRCUIT,

IMAGE DATA COMPENSATION METHOD, AND ELECTRONIC APPARATUS

# AMENDMENT FILED WITH REQUEST FOR CONTINUED EXAMINATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Further to the Notice of Allowance mailed November 4, 2004, please consider the following:

Amendments to the Claims as reflected in the listing of claims; and Remarks.

#### PATENT APPLICATION

OLIFF & BERRIDGE, PLC Telephone: (703) 836-6400 Facsimile: (703) 836-2787



Attorney Docket No.: 111079

### **CUSTOMER NUMBER 25944**

AMENDMENT TRANSMITTAL

In re the Application of

Toru AOKI

Group Art Unit: 2673

Application No.: 09/994,674

Examiner: L. Shapiro

Filed:

November 28, 2001

For:

LIQUID CRYSTAL DISPLAY, IMAGE DATA COMPENSATION CIRCUIT, IMAGE DATA

COMPENSATION METHOD, AND ELECTRONIC APPARATUS

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Entitlement to small entity status is hereby asserted.
- Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL CLAIMS	*25 MINUS	**20	=5	
INDEP CLAIMS	*9 MINUS	***6	=3	
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY		OTHER SMALL	
RATE	ADD'L FEE	ΩR	RATE
x 25	\$		x 50
x 100	\$		x 200
+ 180	\$	ΩR	+ 360
	\$		

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 163162 in the amount of \$850.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff

Registration No. 27,075

Kevin M. McKinley Registration No. 43,794

JAO:KMM/jb

Date: February 2, 2005